## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number 6/643857

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |  |              |                               |                              |                  |            | SMALL ENTITY TYPE   |                        | OR    | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|---|--|--|--------------|-------------------------------|------------------------------|------------------|------------|---------------------|------------------------|-------|-------------------------------|------------------------|--|
| TOTAL CLAIMS  |  |  | 107          |                               |                              |                  | ſ          | RATE                | FEE                    |       | RATE                          | FEE                    |  |
| FOR   |  |  | NUMBER FILED |                               | NUMBI                        | ER EXTRA         |            | BASIC FEE           | 375.00                 | OR    | BASIC FEE                     | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |  | 1 o mini     | us 20=                        | . 90                         |                  |            | X\$ 9=              | 810                    | OR    | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS  |  |  | 27 minus 3 = |                               |                              | 4                |            | X42=                | 10.08                  | OR    | X84=                          |                        |  |
| MU  | LTIPLE DEPENI  | DENT CLAIM P                               | RESENT       |                               |                              |                  |            | +140=               | 140                    | OR    | +280=                         |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |  |              |                               |                              | L                | TOTAL      | 2333                | OR                     | TOTAL |                               |                        |  |
| $\Delta$  | //29/07 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |  |              |                               |                              |                  |            | SMALL ENTITY O      |                        |       | OTHER THAN OR SMALL ENTITY    |                        |  |
| AMENDMENT A   | ×  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY                 | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| MON   | Total  | .23  | Minus        | 11                            | 10                           | -                |            | X\$ 9=              |                        | OR    | X\$18=                        |                        |  |
| AME   | Independent FIRST PRESE  | * 6  | Minus        | ENIDEND                       | Z<br>r Člaim                 |                  |            | X42=                |                        | OR    | X84=                          |                        |  |
|   | FIRST PRESE  | · ·  | OLTIFLE GEF  | ENDEN                         | CCAIIVI                      |                  | ,          | +140=               |                        | OR    | +280=                         |                        |  |
|   | 9/19/17<br>(Column 1) (Column 2) (Column 3)                          |  |              |                               |                              |                  |            | TOTAL<br>ADDIT. FEE | , ·                    | OR    | TOTAL<br>ADDIT. FEE           |                        |  |
|   |  |  |              |                               |                              |                  | _          |                     |                        |       |                               |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER.<br>AMENDMENT |              | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | . 21                                       | Minus .      | ** /                          | (0                           | - 0              |            | X\$ 9=              |                        | OR    | X\$18=                        | 7                      |  |
|   | Independent  | • 4  | Minus        | *** ·                         | 77-                          | -0               | lacksquare | X42=                | /                      | OR    | X84=                          | Z                      |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |  |              |                               |                              |                  | <b>,</b>   | +140= (             |                        | OR    | +280=                         |                        |  |
|   |  |  |              |                               | ז                            |                  |            | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT, FEE           |                        |  |
|   |  | (Column 1)                                 |              |                               | mn 2)                        | (Column 3)       | <u> </u>   |                     | . '                    |       |                               |                        |  |
| AMENDMENT C   |  |  |              | NUM<br>PREVI                  | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| Š   | Total  | •  | Minus        | trit .                        |                              | =                | ▋┃         | X\$ 9=              |                        | OR    | X\$18=                        |                        |  |
|   | Independent  | •  | Minus        | ***                           |                              | 5                | ]          | X42=                |                        | OR    | X84=                          |                        |  |
| _   | FIRST PRESE  | NTATION OF M                               | ULTIPLE DEF  | PENDEN                        | T CLAIM                      |                  | ╛╽         |                     |                        |       |                               |                        |  |
| • If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |  |              |                               |                              |                  |            |                     |                        | OR    | +280=                         | <b> </b>               |  |
| "If the entry in column 1 is tess than the entry in column 2, write 'U' in column 3.  "If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1. |  |  |              |                               |                              |                  |            |                     |                        |       |                               |                        |  |